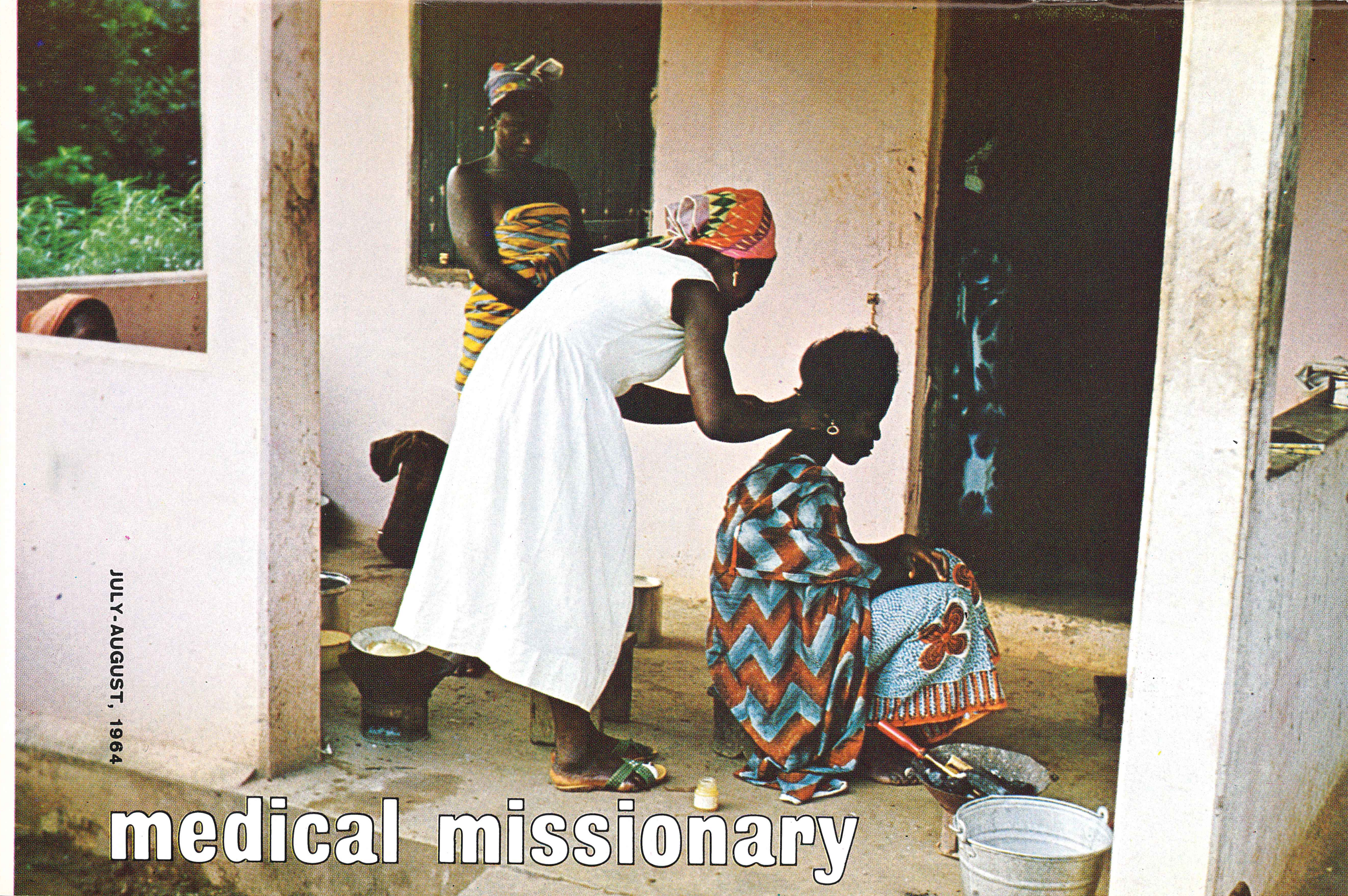
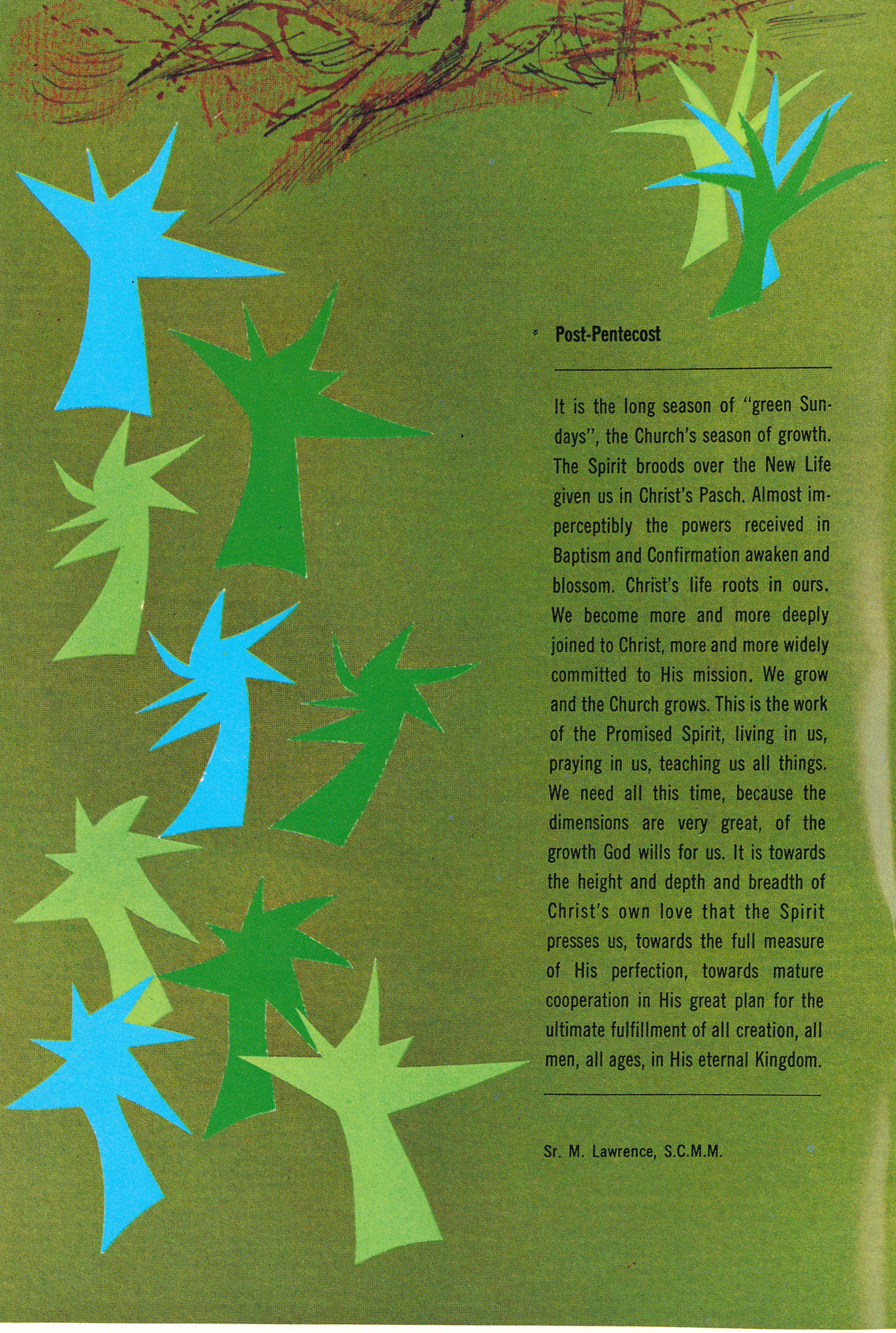


medical missionary

JULY-AUGUST, 1964



Post-Pentecost

It is the long season of "green Sundays", the Church's season of growth. The Spirit broods over the New Life given us in Christ's Pasch. Almost imperceptibly the powers received in Baptism and Confirmation awaken and blossom. Christ's life roots in ours. We become more and more deeply joined to Christ, more and more widely committed to His mission. We grow and the Church grows. This is the work of the Promised Spirit, living in us, praying in us, teaching us all things. We need all this time, because the dimensions are very great, of the growth God wills for us. It is towards the height and depth and breadth of Christ's own love that the Spirit presses us, towards the full measure of His perfection, towards mature cooperation in His great plan for the ultimate fulfillment of all creation, all men, all ages, in His eternal Kingdom.

Sr. M. Lawrence, S.C.M.M.

THE medical missionary

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Cover: Braiding the hair signifies that a young woman is ready for marriage in Ghana.

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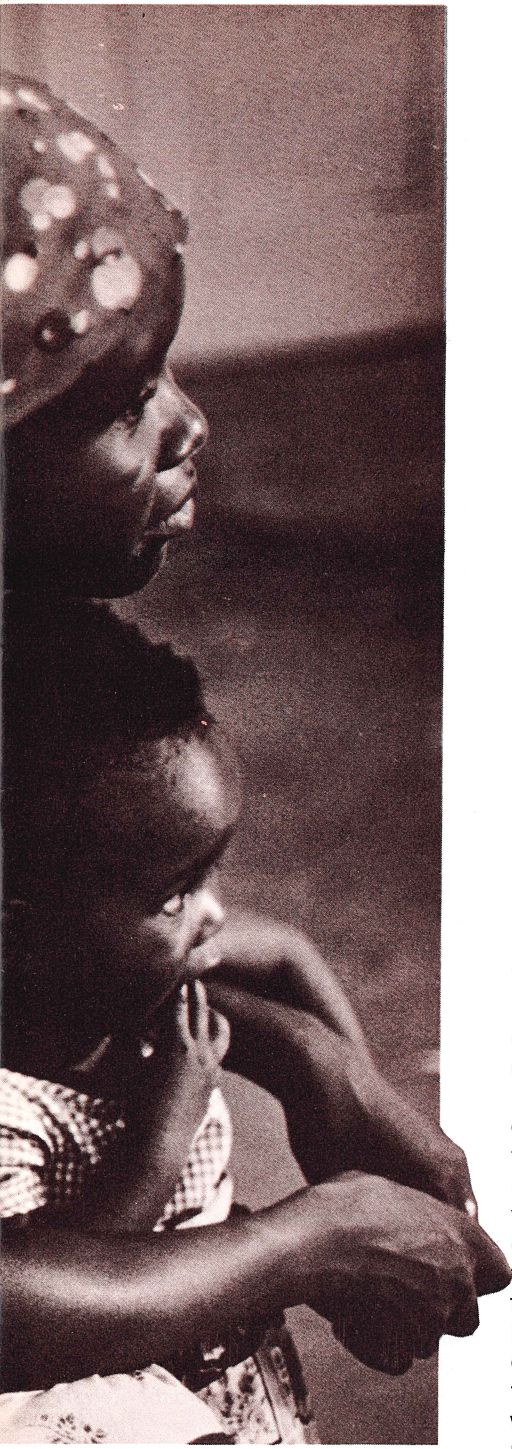
This typical Ghanaian woman with baby on her back is waiting to see the Sister-doctor in Holy Family Hospital's Out-Patient Department.



Women

The West African woman, like her counterpart in other parts of the world, plays an important role in both domestic and public life. She is the queen-mother, the preserver of tradition and the custodian of customs. Her role, however, is gradually changing with the new phase of life in Africa.

Until the time of her first marriage, the West African girl of former days was entirely under the guidance of her parents. She worked with them on the farm. At the time of marriage, her partner was generally chosen for her by her parents and she gave them unqualified credit for their wisdom. The head-money (or bride-price) was, and still is, the tangible seal of the marriage contract. The amount varies according to localities. That the amount of money demanded is large in some places is the consequence of the man's inclination to get more of everything.

Polygamy tended to lower the status of the West African woman of former times. She was obliged to share the affection of her husband with other women. Under such circumstances, she could not sufficiently influence the actions of her husband without rousing the natural jealousy of her rivals. This made her cling more closely to her children. Woman's position was also influenced by economic conditions. She was expected to work the farm or be a petty shopkeeper.

in West Africa

By

In spite of her great dependence on man, the West African woman wielded great influence in the family and society. As a mother, she was the one who saw to it that all customary rites for her children were performed accurately and at the proper time. She was the chief adviser and trainer of her daughters, while her sons consulted both her and her husband. As a grandmother, she was the last judge in any serious case affecting her children and grandchildren. All these influences could be maintained in former times, principally because travel to distant places was rare. Marriage partners were chosen from the same town or from one close by.

The woman's influence often exceeded the boundaries of the home. As a queen-mother, she was very influential in the choice of a new chief or king, and her refusal to accept a nomination was rarely overruled by the men folk. The queen-mother was generally a sister or relative of the king. Very rarely was she the actual mother of the ruling king, and she was never his wife. In conjunction with her companions, the West African woman gave directions to the public acts of the men folk. There were wars which were actually initiated by the women.

Life in Africa is now changing fast and with it the status of woman. The question is: Will the West African woman of today accept the challenge of her changing status and still remain a woman, the housekeeper, the companion of her husband, the trainer and chief adviser of her daughters and the directress of men in public affairs?

The first remarkable change comes from education. The West African woman can now enlarge her knowledge of affairs by reading the past and present events of other people and countries. She can send letters to, and receive others from, different places. All these have great influence, good or bad, on her life, for she no longer has to rely solely on her parents and town or village. Means of transport have increased outside influences, and she can now easily travel abroad and see the outside world for herself.

Among the great changes that are presently occurring, the most important is the opportunity now offered for economic independence. The West African woman is no longer constrained to remain a farmer, for she can also be a school teacher, a clerk, a doctor, a barrister. Indeed, all the trades and professions are open to her. There are women members of Parliament and Ministers of State.

Changes such as these breed special problems for the Christian woman. Work may take her, in her teenage, from the protection of her parents and a familiar environment to strange surroundings where she is obliged to live by herself. Religion and economic prosperity rarely march peacefully together. The West African woman has constantly to re-

His Excellency Joseph A. Essuah, Bishop of Kumasi

mind herself that she is a Christian and that her spiritual requirements cannot be neglected with impunity. This work is rendered harder by the fact that our pagan beliefs still have a grip on us, because very few of us have had Christian grandparents. Moreover, the old pagan surroundings are as vivid as they were before.

It is rightly said that the time of marriage is the turning point in a woman's life. A successful marriage brings her happiness and makes easier the work of her own salvation, while a bad one is dangerous to both soul and body. The West African woman of former days took her partner from among boys with whom she had played from childhood. Because she rarely traveled far from home, she scarcely knew any other boys. Today employment takes her at a very early age away from her parents and town or village. She meets boys from different places and surroundings. She can now definitely choose her partner long before the parents are informed and, inexperienced as she is, her choice may be determined by the external beauty or wealth of the man. The non-Christian woman can rely on custom which allows her to marry in the morning and divorce in the evening; but the Christian, especially the Catholic, woman has to take into account the indissolubility of marriage before she makes her choice.

The West African woman has a special role to play in the religious, economic and political changes that are sweeping through Africa. Her influence in the family is most important. Now she has to educate her children not only as citizens, but as Christians. She must give them a good example in an environment which is daily becoming more materialistic. When she has successfully exerted that influence for the glory of God, society will benefit, for the honest, energetic and Christian woman, whose authority is acknowledged in her own house, has a great asset to offer to the wider circle outside her home. This is the challenge now presented to the West African woman, and we wait to see how she is going to meet it.

The West African woman has a special role to play in the religious, economic and political changes that are sweeping through Africa.

Mr. and Mrs.

Anna Marie and Tomasi's thatch-roofed home is nestled in the lovely hills and countryside of Uganda.

By Rev. Francis Zagorc, C. S. C.

in Uganda

Father Zagorc, C.S.C., "puts fire" into motorcycle and sets out across the hills that will bring him to Kyenjojo and the home of Tomasi and Anna Marie.

Yozefu rushed up and began beating on the door. His troubled voice coupled with the insistent pounding woke me from a sound siesta. Yozefu, our head catechist, respected the siesta. Only an emergency would make him risk a call-down.

Adjusting my eyes to Uganda's brilliant tropical sunlight, I saw Yozefu in his white "kanzu," a long gown worn by the Batoro. "Tata, Anna Maria, ali kubi muno." Even at this stage I knew enough Rutoro to understand that Anna Maria was very sick. She had to be, otherwise Yozefu would have begun with the traditional greetings.

I picked up my sick-call set and went to the Church to get the Blessed Sacrament. Anna Maria would certainly want to receive Our Lord. With the Blessed Sacrament tucked away in my cassock, I made for the motorcycle. Yozefu was kneeling reverently next to it, probably saying a prayer that I would be able to avoid one of those "occasional spills." Having "put fire" into the cycle, Yozefu climbed aboard.

Anna Maria, everyone knew her. Just a week ago I had seen her at Kyenjojo Village when I went to say Mass. She was fine and in her usual good spirits. What could have happened? So many thoughts passed through my mind on the ten-mile journey from Butiti to Kyenjojo.

Jogging along on the red-earth road, I thought of many things. "It's not often," I recall Father John saying shortly after I had arrived in Uganda, "that you can point to a house and say: 'here lives a real Christian family.' " Father spoke in glowing terms of Tomasi Byaruhanga and Anna Marie Bonabana.

That first month at Butiti, how could I forget it? One thing I had to learn quickly was that this District in Uganda was called Toro, one person referred to as a *Mu*toro, two or more as *Ba*toro. To confuse the issue, the language is *Ru*toro. Anna Maria, though married, kept her "body name." In fact, as Anna Maria later told me, her parents were hoping for a boy. When "she" came, they called her Bonabana meaning that all are children in God's sight.

Shortly after I arrived, Father John asked me to say Mass at Kyenjojo. There I met Tomasi and his wife, Anna Maria. Tomasi, being the catechist in that sector, was looked up to by the other villagers. When the drums had gathered the people together and the altar prepared, I began my first Mass in "the bush."

Tomasi read the Gospel, made some announcements followed by a sermon. "Wow," I thought, "when will I be able to talk like that!" A familiar word like "and" and "but" in Rutoro gave me hope. After the sermon, some people picked up straws which they handed to Tomasi. He came up to the altar and it was bedlam. Tomasi was trying to tell me how many would receive Holy Communion.

After Mass—no exodus during the Last Gospel—I went outside where the people could have a good look at this "young Tata" (Father). How friendly they were, and always smiling. Though I could only smile and nod, I could see I had found a home among these warm people.

Tomasi's mud-and-waddle home, nicely finished with a cement-sand mixture, stood near the church. The thatched roof added a touch of beauty to the local surroundings. I entered the doorway. Tomasi offered a chair and when I sat down, he began greeting me as though this was the first time we had met that day. It was his way of showing his pleasure in welcoming a guest to his home. A curtain moved and in walked a woman. She came up to me, knelt down and said, "Tata, webale kwija." ("Thank you for coming, Father.") I felt the warmth of the welcome. This was Anna Maria. Then followed their three lovely children. Their simpler greeting gave me courage.

We sat and talked about a number of things. Tomasi, who had three cows, offered me a glass of milk. The children crouched by the wall and didn't take their eyes off the "white Father." They were all smiles, especially when I proffered a "one-word" opinion on anything. Later, Tomasi accompanied me outside, and the children watched from a distance as I "put fire" into the motorcycle.

Since that first visit to Kyenjojo, I have returned many times and soon discovered what Father John meant when he said "here is a real Christian family." We spoke of their customs, the neighbors, the children in school and in the catechumenate. It was interesting to hear their point of view.

Marriages — ideally — are polygamous, meaning that the husband may have a plurality of wives. But, as Tomasi explained, "in practice today, most marriages are monogamous." With a chuckle, he said "It's pretty expensive the other way!" Anna Maria made no comment. Today, marriage among the Batoro is regarded as a more or less permanent union.

The family, as the basic unit of domestic society, is regarded highly by both men and women. The man, though marrying within the Batoro tribe, must marry a woman who is not of his own class. His status is higher than a woman in this patriarchal society. Christian or "ring" marriages involve the payment of bridewealth. Formerly, the man paid in cows, but today the transaction is in cash.

Marriages, Tomasi told me, normally are arranged by the parents. Obedience and deference are the virtues of a good wife. Interestingly, if a wife offends her husband, he may beat her, but in moderation! Another chuckle from Tomasi. Then it was Anna Maria's turn. "A Mutoro woman nevertheless enjoys her rights." The husband, as provider, must house and clothe her—and give her a hoe! If the going gets tough, she can always run home to mother and father.

Between husband and wife, a sensitive intimacy may not be part of the Toro ideal, but there is love and honor and companionship of a kind. The Batoro have a saying that "without a wife, nothing can be done." Anna Maria easily proved this point. She kept the house spotless, reared the children with head and heart and provided a good table.

I recalled other visits when I would go to the back of the house. In front of the kitchen (a separate building) sat Anna Maria peeling the local sweet potatoes, grinding the cassava flour, preparing the food bananas. The three children had their chores each day. The oldest, Tomasi, was the water carrier. This meant going some distance a number of times each day to the well. Little Maria helped her mother while Yozefu looked after the compound. Anna Maria spoke with love and affection and her children were "God's gift to them."

Perhaps God, Who had given them so many gifts, is now asking for something in return. Perhaps He wants Anna Maria. I thought of this as Yozefu stretched out his hand. I had almost missed the turn in the direction of Tomasi's house.

Not a word was said when I reached the house. Tomasi, old faithful Tomasi, knew I had the Blessed Sacrament and was kneeling in front of the doorway. On a bamboo bed, lay Anna Maria. She was in pain, but the pain was subdued by the peace written on her face. How beautifully and serenely she received the sacrament of the sick.

I sat down by her bedside. We talked of many things—of health, of healing, of death if God so willed it—as Tomasi made preparations for the 35-mile trip to the hospital in Fort Portal. Holy Family Hospital, in terms of years, was still a newcomer in our midst, but it had already grown familiar to people like Anna Maria, people in need of a place to go for medical care. I couldn't help but reflect—what a strong support this hospital was to the Christian families of Toro—what a friend it had become to the many people who lived in this section of Uganda that I now called home.

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a nurse midwife reports from GHANA

By Sister Marianne

In a circle sit twelve women, serene and happy for the moment. A student nurse tries to coax Afia Asantewaa to join us, but she refuses. As Yaa Lobi does not understand Twi, she also declines. She is from the North and speaks Dagarti. After much pushing of chairs, fixing of head kerchiefs, putting on of sandals and smoothing of hospital gowns, we are again ready to start mothers class at Holy Family Hospital, Berekum, 300 miles from the Coast in the African Bush. Each afternoon one hour's class is given to the maternity patients. As they usually remain in the hospital four to five days after delivery, a planned program enables them to get some instruction in diet, hygiene, baby care, simple anatomy (what happened to them during pregnancy and delivery) and their duties as wives and mothers.

There is great scope here for maternity and child welfare work. Back in 1948, before we opened our hospital

Mother's class at Holy Family Hospital, Berekum. To know these women is to know the women of Ghana and to understand their problems.

in Berekum, maternal and infant mortality rates were fantastically high. Eighty per cent of the babies died under one year of age. Today the women of Ghana are beginning to realize the value and need for full maternity care. They have the greatest confidence in our medicine and advice. Seven years ago the women who came for prenatal care were the exception; today they are becoming the rule.

But let us get back to our mothers class and to introductions, for to know these women is to know the women of Ghana today and to understand their problems.

To my right sits Abena Dapaa. She delivered a six pound boy two days ago. Her first baby was a stillborn, delivered at home. Her grandmother had assisted at that delivery after giving her native herbs to induce labor. Grandmother had also covered Abena's abdomen with leaves. As the crude herbs are very potent, Abena had strong, almost continual contractions. These were accompanied by threats and exhortations from Granny. The result was that Abena pushed too hard before it was time. The baby was so limp when he was born that no one could say if he had a heart beat or not. Advice from a cousin and fear of divorce prompted Abena to attend our ante-natal clinic during her second pregnancy. It took much encouragement and explanation to help her cooperate. Granny, who also supplied help and encouragement for this delivery from the verandah outside, got down on both knees to thank the Sister midwife.

Next to Abena sits Lucy Amoah, an attractive Christian mother with nine living children. Everyone looks at her with respect. She has had no formal education yet she has that gentle serenity and discipline of the valiant woman: "The heart of her husband trusts in her. She will render him good and not evil, all the days of her life. Her children rose up and called her blessed and her husband praised her." (Proverbs XXXI.) Besides raising her own nine children, she has two extra mouths to feed as her sister died last year, leaving two more in need of a mother's love. Each morning she bakes enough bread to feed 150 students at the teachers training college. The older girls help with the kneading of the bread. This income supplements her husband's catechist salary. She could easily earn the "mother of the year" award. In the class discussion on the duties of the wife and mother, her opinions show the wisdom that comes with faith and common sense. Her mother love is evident in the close family life so rare in the town. It is a privilege to know her.

Yesterday, discussion in class centered on the mutual problem of being uneducated mothers with educated children. Many of the young mothers simply cannot get their children to obey. Some have children who refuse to go to school unless they are given a shilling for "sweet chop" (candy), new note books, etc. The mother has no way of knowing if they are telling the truth. She is too shy to go to the teacher herself and her husband would never go.

Akosua Mansah sits quietly, but listens intently. She has just delivered her first born, so as yet she is not concerned with these problems. However, Akosua is the talk of the hospital. Her husband had actually stayed near the hopsital for her whole labor and delivery.

Akosua had come from her village and family to be with her husband. He had his first job after finishing high school. As he had insisted that she attend clinic, she was aware of the signs of the onset of labor and what to expect. Her husband brought her to the hospital one night. Both were very anxious as they were far from home and family. It would be a terrible calamity if anything happened. Mr. Mansah would get much abuse from his wife's family, as it was, for not taking her home for delivery. It is still customary for the wife to return to her mother two months before delivery and stay two to three months afterwards. (This prolonged absence of the mother is one reason why husbands take second and third wives.)

Akosua's delivery was a golden opportunity for the Sister midwife to assist at what we call "a normal natural childbirth." The process of labor was explained to both of them. Papa standing outside the window urged Akosua to cooperate with all the instructions of the nurse midwife. He encouraged Akosua to do abdominal breathing during her contractions. His support of her was discussed by the new students with much awe and incredulity. This was such a contrast to an ordinary home delivery in a dark room with mother and grandmother using plenty of native leaves and shouts of, "push, push, push," and papa perhaps miles away.

He was so impressed with how difficult it was that he kept telling Akosua how brave she was. Together they gave thanks to God for the safe delivery of a darling boy. Then as a reward for his labors and indeed his right as a father, he was given the baby to hold and to show to his wife. Their joy was contagious and the student on night duty clapped her hands with them. Then the student heated up the cold soup and proud papa fed his wife—another precedent shattering gesture. Whoever heard of a man waiting on his wife in the hospital? But young Mr. Mansah is a Christian and had twelve years of education in a Christian school. He has recognized the difference between the demands and indifference of the pagan man and the kindness and generosity of the Christian man. As a Christian he is also aware of the inherent unity

80% of the babies under one year of age
in this area
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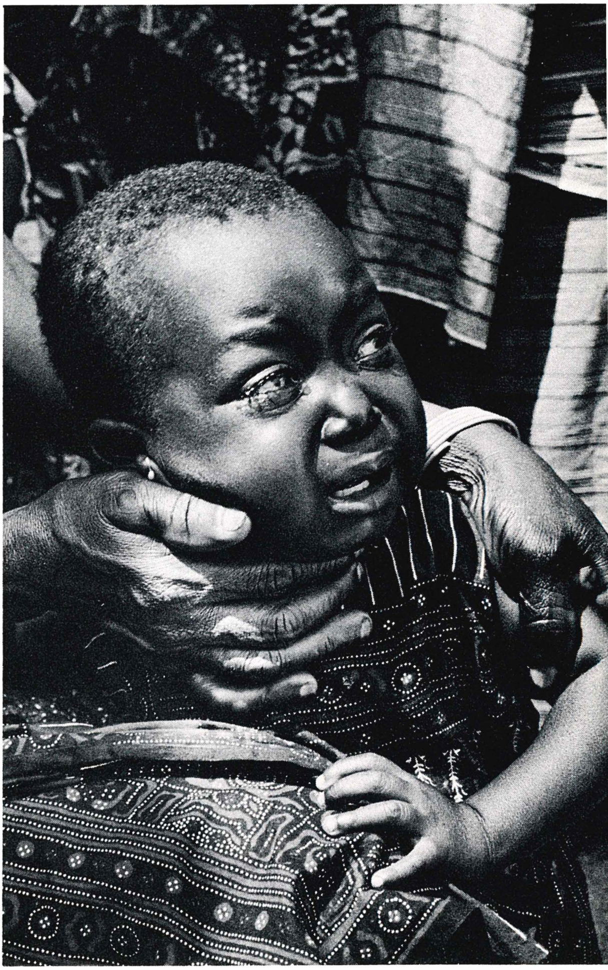
Today,
the women of Ghana
are beginning to realize
the value of full maternity care.



of the Christian family, where one wife and husband are closely united, dedicated to bringing up one closely knit family.

Afia Asantewaa still refuses to join in the class discussion, although we all sense that she is listening, even if she keeps the bed sheet over her head. Afia needs much kindness and understanding. Her husband has two other wives. She had delivered six stillborns, three of which were prematures. For the last two pregnancies she attended the clinic. But she came irregularly. She was advised to be admitted to hospital a month before her due date to avoid another premature delivery. Why didn't she come? She traveled forty miles to her mother's village. Her family convinced her that she was a bad woman, displeasing to God. She must have been unfaithful to have all this trouble. They frightened her with their accusations. She took native medicine to help the baby grow stronger. One night she started contractions and was rushed back to the hospital over the bumpy, dusty bush road in the back of a lorry. She arrived exhausted and shortly after delivered a wee girl. The baby struggled for life but gave up after two hours, in spite of all the helps of oxygen, incubator and stimulants. When she returns to her family circle, Afia will be received coolly. Keeping her grief to herself, she will return to her sewing machine in the market. There she will keep busy making children's clothing to sell and in this way she will support herself. Her husband will get another wife.

Three of the young mothers are school girls. They plan to leave their new babies with their mothers or grandmothers so that they can continue their education. Their husbands are also in school and have no intention of assuming their full paternal obligations until after they graduate. In the meantime the generous grandmothers will struggle with formulas and baby bottles. Indeed, this is a far cry from simple breast feeding. It is a real bother to have to carry a two gallon tin of water up a dusty road one or two miles from the river. Then a wood fire must be started (after collecting the fire wood, of course), a pan found of the right size to fit a baby bottle, and a bottle and nipple boiled. One cannot make more than eight ounces of formula at a time, as there is no refrigerator in the village. If baby takes only half, the other half spoils in the heat. One must start from scratch every time baby gets hungry. The smallest contamination causes diarrhea and fever. Then the whole compound is distressed with the cries of the suffering child. Everyone comes to give advice and the elders wonder if the young mother's education is more valuable than the health and happiness of the baby.

When class is finished, the student asks the women what they would like to discuss next time, what they feel is most important for them to know. Most often they agree that their biggest problem is what to feed their babies when they get to the toddler age. They would appreciate classes on feeding the eight-months to a year old child, as weaning is one of their big difficulties.

To the observant nurse midwife, one big need is ante-natal classes to help the patient prepare, cooperate and participate in delivery without fear and with knowledge of what is happening step by step. The mothers need to know, to become fully aware of their specific role, not only to conceive, carry, deliver and nourish their child, but to teach and direct his growth and development throughout his young life. Classes decrease superstition and aid in developing the mother's self confidence in her all embracing role as wife and mother.

Preparing a baby bottle is no small achievement here. Carrying a two gallon tin of water from a water hole, sometimes as much as two miles away, is only the beginning of the process.

Classes with the fathers would also be a tremendous help both to mutual understanding and support, as well as for achieving that unity so desperately needed to develop a kind of family life such as we know it, wherein mother and father live together with their children as one unit. But this cannot easily happen in the polygamous family system still so prevalent throughout Africa today. However, wherever the impact of economics, education, industrialization and Christian ideas have penetrated and made their imprint, polygamy is bound to give way and is giving way.

It is the privilege of the nurse midwife to be able to help these mothers not only medically but spiritually, so that they will know that their vocation in life—their reason for being in God's plan—is not just to "pound fufu" or to farm the land, but to fulfill all their womanly tasks in the best possible way, in order to secure their family life and give glory to God their creator.

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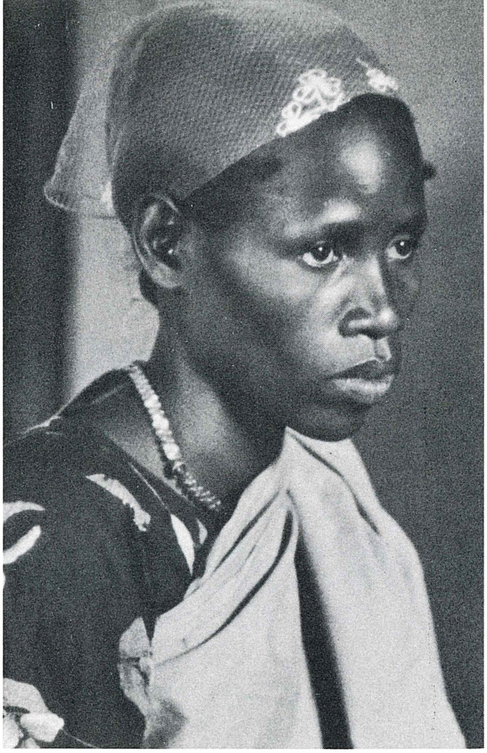
compassion…

to reach out instinctively
to the misery
the pain
the blindness of another

to share this burden
and in the sharing
ease its dreadful weight.



Mbabazi, "the youngest of many wives", had failed in the one thing that was important to her husband, the one thing that would give her status in her family.

Petero came to the hospital twice a day to see Dorothea. This Christian couple was obviously delighted with each other and with their new baby.

a study i

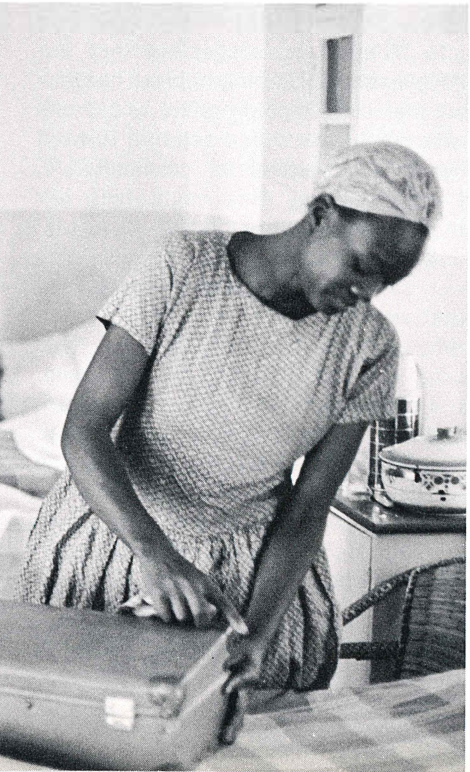
By Sister Marie Sarto

Sister Marie Sarto congratulates Dorothea and Petero as they prepare to return home after the birth of their son.

n contrast

As I walked into the ward, I noticed Mbabazi, a new patient. She was a very lovely Ugandan woman but she did not appear happy. I quickly checked her chart and then I understood why. She was uncertain, uncertain of many things. She had come to Holy Family Hospital in the middle of the night because she was worried that her baby would arrive very shortly, although it wasn't due for another two months. This was her first baby and she was the youngest of many wives, all of whom had many children. Why was this happening to her? Was it because she had done something wrong? Perhaps one of the wives was jealous of her and was causing this tragedy.

Whatever the reason, her premonitions were correct. About three days after admission, her baby was born prematurely and died a few hours later. During these three days, I noticed that her only visitors were the women folk of her family, perhaps some of the other wives. However, shortly after the baby died, Kabahandi, her husband, arrived. He appeared to be very interested in the baby and was quite sad over its death. He stayed only a few minutes and then left. There had been no words of assurance for Mbabazi before the arrival of the baby and no words of consolation following its death. She was very much alone in her sorrow.



After her husband left, Mbabazi became despondent and did not seem to care about anything, especially her own well being. She had failed in the one thing that was important to her husband, the one thing that would give her status in her family. She, herself, as a person, was of no consequence. As one woman expressed it, "But I am just a woman." This was how Mbabazi felt.

How to help her, I thought, to realize that she is important, that she has a unique human dignity, that she does deserve respect. Had all the African women I had met shared Mbabazi's attitude, I asked myself?

No, certainly, they had not. It seemed to me that those who shared her plight were becoming less and less. I thought of Maria Kisembo who had also lost her baby in a similar way. Paulo, her husband, left his home some twenty miles away so that he could be near her. Then there was Dorothea Kabakidi whose baby was found to be in an abnormal position. A caesarean section was necessary for delivery. Petero, her husband, waited patiently until the decision was made. When he was asked for permission to do surgery, he hesitated. I thought that he was afraid and was going to refuse, so I explained that the doctor wanted Dorothea to have a live child, and that was the reason for the operation. But we would need his permission. He assured me that he understood and wanted this child very much, but . . . "could he not speak to Dorothea first and see how she felt about it."

Sister M. Gregory performed the surgery and Dorothea had a beautiful boy. As I came from the operating room with Junior in my arms, I met Petero outside. I congratulated him and showed him his new son, screaming and redfaced. Petero said, "He is very good, but how is Dorothea, Sister?"

All through her recovery, Petero came to see Dorothea twice a day, at his lunch hour and in the evening. He was delighted with his wife and new baby. Dorothea's mother was not living but Petero's mother was there daily, giving her motherly support and taking care of her wishes. She was so devoted and they seemed so close that, for many days, we thought that she was her own mother.

Dorothea had just gone home when Mbabazi arrived, so the difference in their lives was very striking.

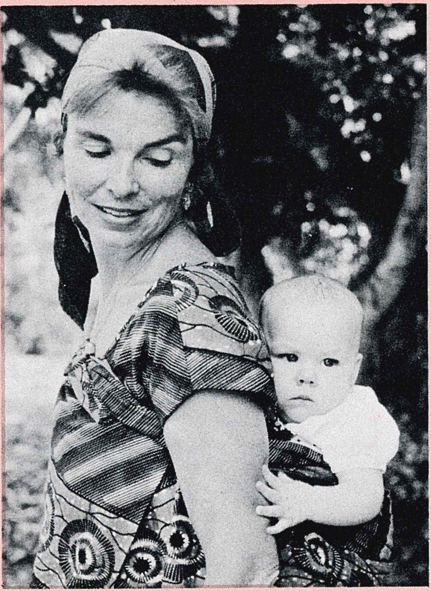
Dorothea and Petero were a good Christian couple. They accepted their troubles as God's Will. Through their mutual love and respect their difficulties were made bearable and were considered a blessing which drew them closer together. Dorothea was not "just a woman." She was Petero's wife and the mother of his child.

Mbabazi came from a world of polygamy. She did not have faith. Her God was not close. She could not believe that God would be interested in an individual. I tried to reassure her. How much I wish for her all the advantages, especially the faith, that Dorothea and Petero have. I tried to instill new hope into Mbabazi by suggesting that she have trust that God might bless her with another child. I told her we would talk with her husband and ask him to send her to the hospital for prenatal care. I explained how this might help her through her next pregnancy.

While Mbabazi said little when this was suggested, she did seem pleased that we were so interested in her welfare, and for the first time her face brightened up with a shy, friendly smile.

I often think of my friend, Mbabazi, and wonder what her life is like right now. Has she lost favor and prestige in her family? Has she overcome her sadness and begun to look forward to the future? Perhaps we will meet again —soon. I hope and pray that we do.

Alice Mahoney is the wife of the U.S. Ambassador to Ghana,Mr. William Mahoney. She is pictured here with her daughter, Noel Fitzgerald, who was the object of the naming ceremony.



a naming ceremony

By Alice D. Mahoney

The arrival of a new child is always the occasion for joy and celebration but in Ghana this is especially so.

Our newest child, Noel Fitzgerald Mahoney, was born just one year ago on April 17, 1963, at Korle Bu Hospital in Accra, the capital of Ghana. Under the expert care of a Ghanaian obstetrician and pediatrician and wonderfully kind "sisters," as nurses are called here, Noel and I were back in our residence five days later. We were showered with gifts, messages and visits from Ghanaians from all walks of life, including President Nkrumah. But aside from her Baptism, the high point of this young lady's first few days on earth was the "outdooring" ceremony.

The outdooring ceremony is an elaborate prayer for the blessing of the family and the new-born infant and it occurs exactly one week after birth.

At the suggestion of some of our Ghanaian friends who are members of the Ga tribe which inhabits Accra, we gathered on our patio at dusk on April 24, 1963. About thirty of the Ghanaians taking part in the ceremony, both men and women, were garbed in their bright tribal robes. We all stood in a large circle and watched as the ceremony began with two Ghanaian medical doctors, members of the tribe and leaders of the rite, pouring the traditional libation and uttering some prayers.

Then the following prayer, which has been translated, was uttered in the Ga language by the leaders with all of the rest of us giving the animated responses:

		Response:
Call to order:	"Attention! Attention! Attention! Peace be with us!"	"Yao!"[1]
	"Attention! Peace be with us."	"Yao!"
	"Attention! Peace be with us."	"Yao!"
	"Are we of one voice?"	"Yao!"
"May the need for chairs in our house increase."		"Yao!"
"May a large number of brooms be ours."		"Yao!"
	(in other words, when we meet to deliberate, may we complete a large circle of chairs and when we band together, to sweep our compound, may a large number of brooms participate—in short, may our tribe increase.)	
"When we dig a well, may we strike water."		"Yao!"
"And when we draw water, may we drink it in peace."		"Yao!"
"This infant newcomer has now arrived with us."		"Yao!"
"Behind her is the dimness of the past."		"Yao!"
"Before her is the brightness of the future."		"Yao!"
"May she come to stay and work and flourish to the benefit of her relations."		"Yao!"
"And may her relations also give her credit abundantly."		"Yao!"
"She came with black; may she go with white."		
	(Which means she was born with the metaphorical black hair, may she live till she is grey—grey with years and not prematurely nor in a single night as men have grown from sudden fears.)[2]	
"But!—but, if on this historic Wednesday, some wicked man, passing by and seeing that we are enraptured with joy at welcoming this infant into our midst; if this envious, wicked person contemplated his diabolical practices against the baby—do we include him in our blessing?"		"No—o, No!!"
"Do we include such a wicked man in our blessing?"		"No—o, No!!"
"He must die his accursed death on a fateful Wednesday or Sunday!"[3,4]		"He must die!!"
"He must die on a fateful Wednesday or Sunday."		"He must die!!"
"Hoot away this wicked man from our midst."		"Ho—o—o!"
"Hoot at this wicked man again."		"Ho—o—o!"

After this exhilarating chorus, the leader then went to each person, held Noel before him, and whispered her new Ghanaian name: Akua (girl born on Wednesday) Atowi (eighth child). We all then supped from a bowl of corn beer specially brewed for the occasion.

Finally, each person came forward and dropped a few shillings on a plate for Noel. This offering has a rather profound significance. By virtue of the gift, the donor not only has a right, but a duty to watch over the child's welfare for the rest of her life.

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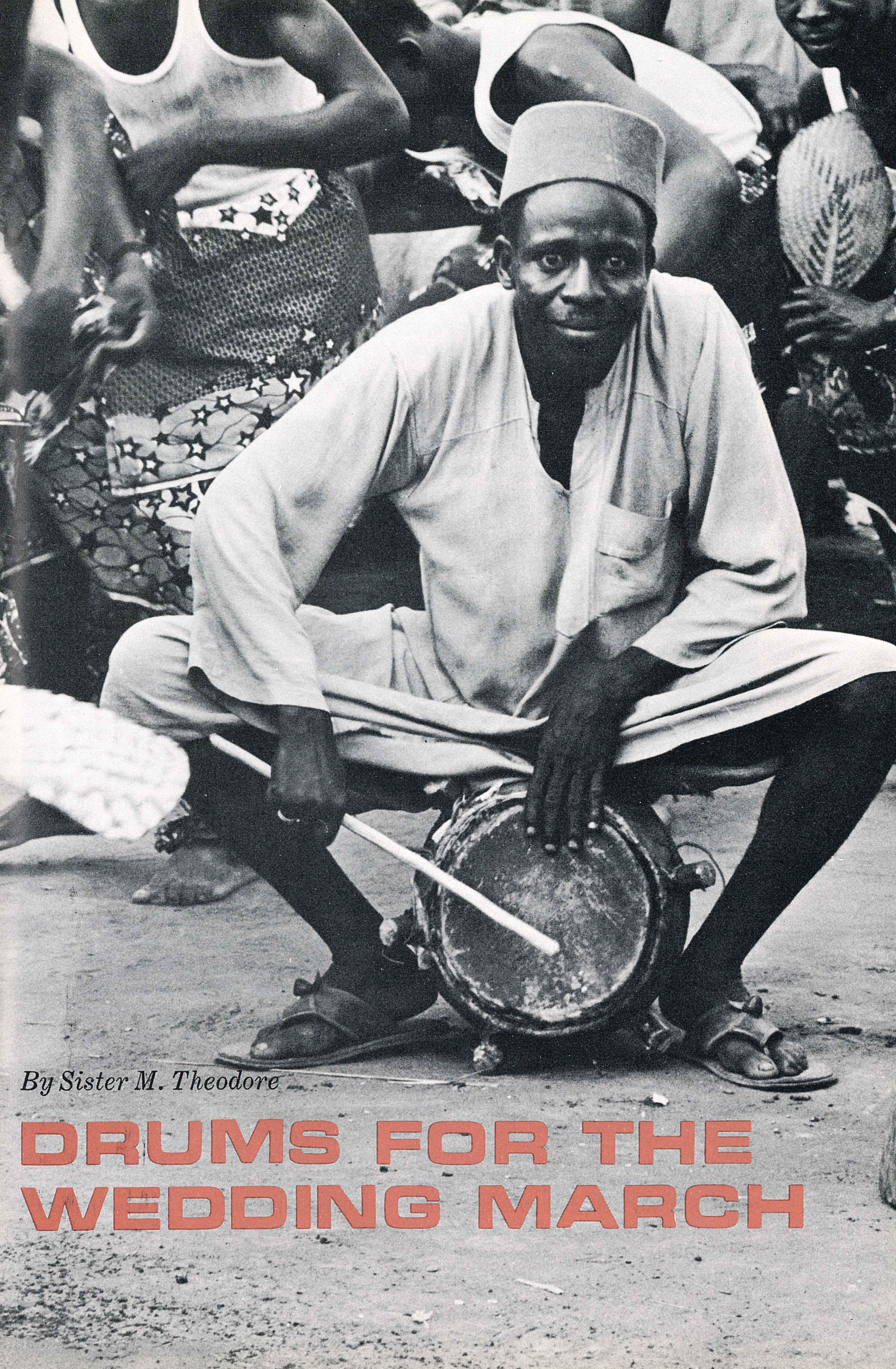
[1] "Yao"—I concur; yes.

[2] Crude adaptation from the "Prisoner of Chillon" (Byron).

[3] Wednesday—the day of the Chief God.

[4] Sunday—the day of the God of the Sun.



By Sister M. Theodore

DRUMS FOR THE WEDDING MARCH

Elizabeth Oyewale was one of our nurse's aides in Holy Family Hospital, Techiman. We had asked her about the marriage customs of her own Nigerian people. Did they carry out the customs of their Yoruba tribe even when living outside their country, or did they adopt those of the Brong people among whom they lived in Techiman? I had learned that Yoruba babies born away from their mother's Nigerian town were not given the tribal facial markings. Would marriage customs also change? No, Elizabeth assured me, whenever possible, Yoruba marriage prescriptions were kept even in Techiman. And she told me about her friend, Alice Mokwe.

Alice was a Nigerian living with her family in Techiman. She was a Christian of the Baptist denomination, and belonged to the Yoruba tribe of Western Nigeria. Alice had been brought from Nigeria as a child when her parents came to Techiman to set up business as traders. They had made their home in the Techiman "Zongo," a section near our hospital where tribes other than the indigenous Brong people usually settled. Being industrious and business-like, her family became successful sellers of cloth and household supplies, and they stayed on in Techiman. Meanwhile, Alice grew into a beautiful young woman and won the heart of a Nigerian boy who was also living in Techiman. Samuel Owi obtained his parents' permission to marry Alice; and they, in turn, procured her parents' consent to the marriage.

Some time after this, Samuel's father presented the customary "bride price" (in this case an amount equivalent to about $30.00) to Alice's parents, and with their acceptance of it, the marriage contract was sealed. The same amount of money was given by Samuel's father to Alice to buy pots and pans and miscellaneous items needed to set up housekeeping. Then only the great feast and the dancing and drumming celebration remained before the bride would be led in procession by her family and friends to her husband's home. Elizabeth would be one of the girls taking part in the dancing. Would we like to come? Indeed we would, and the next evening there were three of us ready when Elizabeth's brother, Nathaniel, called for us.

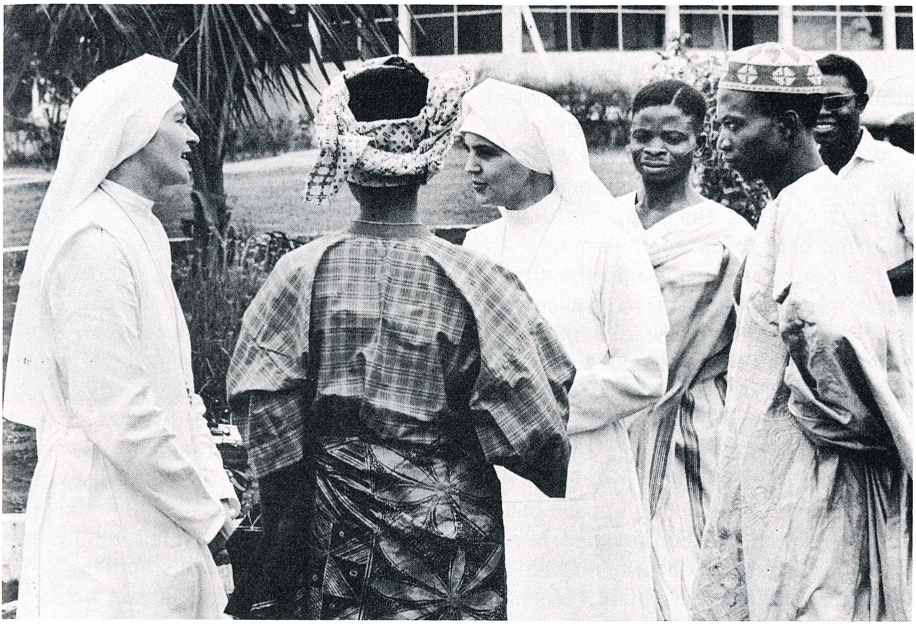
We could hear the drummers already and had many questions about them: "Can anybody drum, Nathaniel?" "How long does it take to learn?" Nathaniel, pleased with our interest, explained that only the Yoruba men learned to play the drums. In addition, the men we would see that night were members of a particular family which had inherited the privileges of playing at these festivities. They began to drum as small boys, and though they learned the rhythms quickly, only years of practice gave them the skill and strength to play the intricate rhythms together, in harmony and with ease, for whole nights with only short intermissions—as they would do tonight. There would be drum "soloists," he said, holding their hourglass shaped drums under the left arm, changing the tones as they squeezed the goat-skin strings running from top to bottom around the drum.

Drum choruses would be there, too, with large and small kettle-type drums of different shapes and tones.

We arrived at the scene. Our many Yoruba friends greeted us, and Nathaniel escorted us to places in the front. Between two of the houses in the Zongo, benches had been lined up in a "U" shaped formation, with an open area for the entrance of the dancers and drummers. The drummers had stopped for a few minutes, and we looked about us, enjoying the company of such pleasant people. The Yoruba in Techiman are

Some of our nursing students dancing and drumming. Squeezing this Yoruba drum changes its tone.

Sister M. Annette and Sister M. Martina chat with some typically costumed Yoruba tribespeople in front of Holy Family Hospital, Techiman.



popularly known as "Lagosians," after Lagos, the important city located in western Nigeria from which many Yoruba traders originate.

They are of a stockier build than the Brong people of Techiman, have more angular facial features and a distinctive facial scarification—several lines curving upward along each side of the face—which accentuates their higher cheek bones and gives them a pleasant expression. Their tribal dress is different, too. Almost every woman here is wearing some shade of blue, their favorite color, I thought. How lovely they look in their round-necked blouses with wide, flowing sleeves and their full, wrap-around skirts which fall just below the knee! Their turbans, deftly twisted, standing out stiffly in bold angles would be the envy of many a woman at home. I knew that the Lagosian women used turbans as American women use their purses and wondered what conglomeration of combs, keys and personal effects had been quickly tucked into those turbans before they left for the celebration that night!

The drums interrupted my musings. The lead drummer went out onto the "dance floor," accompanied by other members of the drumming family. They made the evening breezes vibrate with their rhythms. This was the prelude to the dancing, and the "master of ceremonies" proceeded to each guest individually to receive a donation for the bridal pair and for the drummers. Some of the guests feigned reluctance to contribute, and it was then that the chief drummer displayed his consummate skill. He drew upon his vast repertoire, playing more and more intricate rhythms to entice donations. The festivities were to last all night, so why hurry? . . . and the drummer's muscles alternately rippled and relaxed as he worked his way through to the last guest.

We were anxious to see the dancing and were pleased when Nathaniel informed us that the drummers had switched over to dance rhythms.

The performers came into the circle. Three men began. Each with poise and slow deliberation rendered a rhythmic interpretation of the musical theme being drummed. They danced at a distance from each other, independent, serious, gradually working their way across the open space in the center, as they danced forward, stepped back, dipped, turned, flexed, reached out—all according to their own originality. Then the audience began to take part in it, and other men danced slowly to the center until they reached their favorite dancer and showed their appreciation by pressing a coin to his forehead. At this the favorite would bow graciously and remove the coin, while the admirer danced his retreat into the audience.

Finally, the women had their turn. We had waited long to see Elizabeth! There she was, with Comfort Lagos, entering the circle. Now they began, standing next to each other, facing the closed portion of the "U" formation. Their steps were taken together, carefully synchronized with the drum beats, eyes cast down, arms gracefully lifting as they extended before them the corner of the two yard wrap-around skirt. Other women began to approach in the same manner as the men had done, and Elizabeth and Comfort both received many coins.

By this time we had already spent two hours at the celebration, so we said good night and left for home. Even as we fell off to sleep we heard the beautiful drumming in the distance. I knew it would continue throughout the night. The final event of this festivity would be the joyful procession in which the bride would be led by her family and friends to her husband's home.

Then the marriage contract would be complete, and another Yoruba wedding celebration in Techiman would be over.

+ R.i.p.

Please pray for our deceased benefactors:

Rev. Henry J. Bolger, C.S.C., Notre Dame, Ind. ✠ Rev. Daniel P. Dougherty, C.S.Sp., Washington, D.C. ✠ Rev. Henry W. Greer, S.J., Manila, Philippine Is. ✠ Rev. Howard W. O'Connell, Springfield, Mass. ✠ Rev. Anthony F. Schuermann, St. Louis, Mo. ✠ Bro. Francis Solano Barrett, C.S.C., Austin, Tex. ✠ Sister M. Dorothea, L.C.M., Chicago, Ill. (Sister of Sr. M. Elizabeth, S.C.M.M.) ✠ Mrs. Mary Armstrong, Philadelphia, Pa. ✠ Mrs. Philip Bonley, Dalton, Mass. ✠ Miss Eva Deis, Seaside, Ore. ✠ Mary Grimes, Pawtucket, R.I. ✠ Johanna Graf, Bellaire, N.Y. ✠ Mr. E. Herdman, Lakewood, Ohio ✠ Mrs. Anna Jacko, Lakewood, Ohio (Mother of Sr. M. Cyril, S.C.M.M.) ✠ Mr. William Kelley, Philadelphia, Pa. ✠ Mr. Edward Kistner, Philadelphia, Pa. ✠ Hans Lahr, Flushing, N.Y. ✠ Mr. Lester Laus, Milwaukee, Wisc. (Father of Sr. M. Natalie, S.C.M.M.) ✠ Mr. Joseph McIlvain, Jamaica, L.I., N.Y. ✠ Mr. Patrick S. O'Shaughnessy, Burlington, Ontario (Father of Sr. M. Jonathan, S.C.M.M.) ✠ Mr. Frank Sanders, Brooklyn, N.Y. ✠ Mr. Frank Webster, Sunland, Calif. (Brother of Sr. M. Francis, S.C.M.M.) ✠ Mr. Daniel Williams, Jr., St. Louis, Mo. ✠ Mr. Henry Yacht, Queens Village, N.Y. ✠ Mr. N. H. Tavenner, Paramount, Calif. (Father of Sr. M. Jerome, S.C.M.M.)

Highlights & Insights.

"What the Second Vatican Council is to the Catholic Church, the first Pan-Islamic Congress which closed here (Cairo) after month-long sessions seems destined to become for the more than half a billion Muslims throughout the world," an article in the *Catholic Reporter* relates. The major aim of the Congress was to bring Islam into harmony with modern conditions of life without compromising the teachings of the Koran.

Attended by 67 delegates from 42 Muslim countries, the Congress discussed important issues of an ethical or social nature such as the right of governments to instigate taxation, the question of cooperatives, socialism, restrictions of land ownership, life insurance, etc. Because of various interpretations given the Koran by different sects, Islam is at variance with these and other issues.

While few tangible results are expected from the Research Council of the Congress for at least five years, the Congress did adopt a resolution calling for the establishment of a General Islamic fund to propagate Islam throughout the world and urged the teaching of Arabic in all Muslim countries so that the Koran may be studied in its original language. It concluded with the laying of the foundation stone for a $3,200,000 House of the Koran in Cairo that will be solely responsible for the publication of the Islamic holy book.

CATHOLIC REPORTER,
April 17, 1964

Pope Paul VI spoke recently to a group of visiting doctors, telling them that their concern is with the whole man, body and soul, and commenting on the lively interest the Church shows in the development of medical science.

"This interest on the part of a spiritual organism (the Church) for the material field in which medicine is applied might at first seem strange.

"One might even be tempted to draw a line and accept, for instance, a formula such as this: 'To doctors the body, to a priest the soul.' But this oversimplified view would not harmonize with the deep reality of things.

"Man is one. Distinctions must be made, of course, but what God has joined together cannot be sundered. The doctor who looks after the body cannot help taking into account moral and psychological factors in the patient, just as the Church, in caring for the souls of her sons, cannot ignore their physical and bodily condition.

"Your art, your science, does not have diseases as its object, but rather the diseased. It is the whole human composite that benefits from your scientific knowledge and your practical abilities."

Pope Paul VI to the Seventh Congress of the Latin Medical Union.

"Can anyone but the Christian provide the needed mystique for international cooperation today? The long-oppressed masses of whole continents, everywhere in the throes of revolution, are seeking it and finding only the paper ideology of Communism. The forms of Christianity they see are all too often either comfortable or tired or "merely practical," and always irrelevant. They do not see the Christianity that seeks, at the same time, the ultimate spiritual perfection of the individual *and* the collective perfection of the human condition, of man in society. The second part needs great emphasis because so often denied or ignored by Christians. But it is the whole concept, our participation in the Creative-Redemptive mission of Christ, that is the basis for action."

Thomas E. Quigley, "A Mystique for International Cooperation." JESUIT MISSIONS, May, 1964

Economic experts at the First Asian Population Conference held in New Delhi, India, in December maintained that population growth was *not* a major deterrent to economic growth. In some instances, as in Thailand, Taiwan and the Philippines, population growth had actually been accompanied by an equal measure of economic growth. This is one of the interesting and surprising sidelights presented by the Rev. A. Fonseca, S.J., in a report on developments during the Conference, which was published recently in the *Bombay Examiner.*

Although the draft report and resolutions of the Conference contained some contradictory statements and reflected the varying opinions of the delegates, "this first Asian Population Conference was certainly a very useful and fruitful meeting of minds," says Father Fonseca. "Fortunately, the Population Conference revealed that drastic fertility is no sure way for the achievement of higher standards of living. The mind of the Conference veered towards the direction of a more positive policy of active growth in agricultural and industrial production, in the improvement and multiplication of health services and in the expansion of education, with training schemes for the fullest use of manpower resources and the development of research in all these fields."

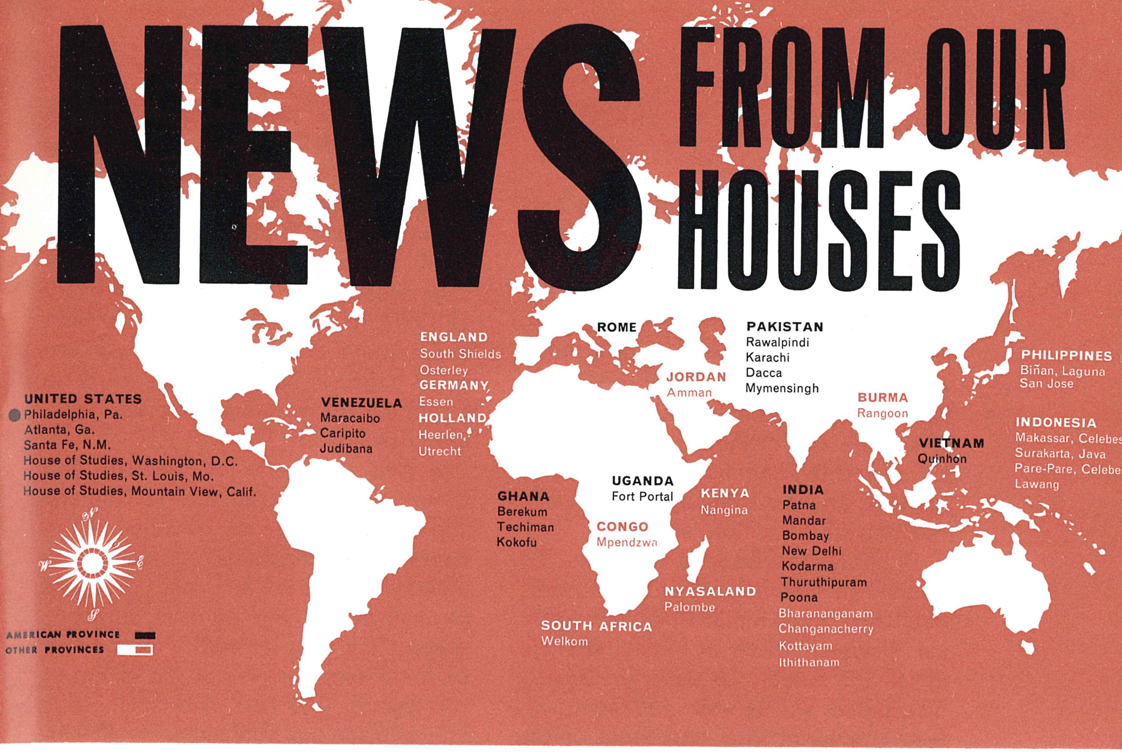
A. Fonseca, S.J. "The First Asian Population Conference," BOMBAY EXAMINER, February 1, 1964

Doctor M. S. Chada, Director General of Health Services of the Government of India, wants help "from any organization" in relieving the misery and suffering of his countrymen.

Speaking at the annual meeting of the Catholic Hospital Association of India held in New Delhi, Dr. Chada said: "Every hospital, institution, dispensary, doctor or nurse makes a substantial contribution to lighten the task. We are grateful to the Catholic Hospital Association for maintaining so many institutions."

THE HERALD, November, 1963

NEWS FROM OUR HOUSES


UNITED STATES
Philadelphia, Pa.
Atlanta, Ga.
Santa Fe, N.M.
House of Studies, Washington, D.C.
House of Studies, St. Louis, Mo.
House of Studies, Mountain View, Calif.
VENEZUELA
Maracaibo
Caripito
Judibana
ENGLAND
South Shields
Osterley
GERMANY
Essen
HOLLAND
Heerlen,
Utrecht
ROME
JORDAN
Amman
PAKISTAN
Rawalpindi
Karachi
Dacca
Mymensingh
BURMA
Rangoon
PHILIPPINES
Biñan, Laguna
San Jose
INDONESIA
Makassar, Celebes
Surakarta, Java
Pare-Pare, Celebe
Lawang
VIETNAM
Quinhon
GHANA
Berekum
Techiman
Kokofu
UGANDA
Fort Portal
CONGO
Mpendzwa
KENYA
Nangina
INDIA
Patna
Mandar
Bombay
New Delhi
Kodarma
Thuruthipuram
Poona
Bharananganam
Changanacherry
Kottayam
Ithithanam
NYASALAND
Palombe
SOUTH AFRICA
Welkom
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AMERICAN PROVINCE
OTHER PROVINCES

GERMANY

Profession Day

February 11 was indeed a red-letter day for us. Our first three novices made their first vows, one postulant received the habit and four new postulants entered. We were very happy to have Mother Dengel with us for the ceremony and also for the retreat preceding it.

Our good, fatherly Bishop Dr. Francis Hengsbach of Essen gave us the honor of officiating at the ceremony. He takes a very lively interest in our growth. We started the ceremony at 7:30 a.m. and all went smoothly. We opened the big door to our parlour, as our chapel is much too small, and everybody fitted in nicely. All the novices and the postulants had visitors and even the relatives from East Tirol had come all the way from the mountains to be present.

Sister M. Jutta
Essen-Steele-Horst

The first three novices to make profession of vows in Essen, Germany, are pictured here receiving their silver crucifixes and blue veils from His Excellency Bishop Dr. Francis Hengsback of Essen.

INDIA

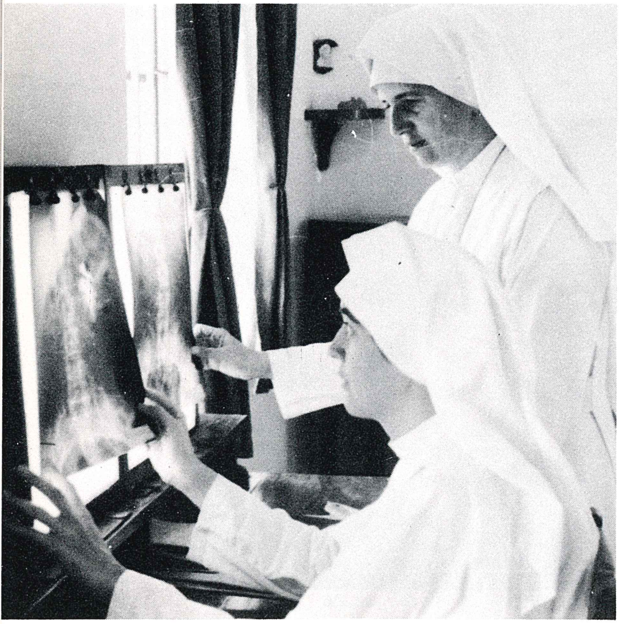
Tuberculosis

Yesterday was World Health Day and Sister M. Paul, M.D., and I attended the meeting of the Indian Medical Association here in Patna to commemorate the occasion. This year's topic is Tuberculosis, a timely one for us here in India where about 14% of the world's TB patients live. Under the chairmanship of Dr. Hai, one of Patna's leading clinicians, and Dr. Sammodar, president of the IMA, an interesting symposium was held. About 80 doctors attended.

Dr. Karan, Director of the Patna TB Center, gave some very pertinent facts published by the Indian Council of Medical Research. Here in India there are at least 7 million TB patients, equally distributed among rich and poor, village and town. The magnitude of the problem facing health workers is well appreciated in the fact that 75% or more of the patients present themselves in advanced or moderately advanced stages, rarely in early ones, and that the attack rate in children under 14 is 70%! A communal approach has been suggested, with 1 TB center for every 120,000 of population and utilization of all general clinics for domiciliary care of TB patients. These centers would be equipped with suitable X-ray and laboratory facilities.

A plea was made for adequate and adequately prolonged anti-TB therapy and for early referral of suitable patients to the surgeons. Although segmental resection is most desirable physiologically, the thoracic surgeons present felt that it could almost never be done here because of the extent of the lesions, and that likewise there is still a place for thoracoplasty in certain types of cases that are common enough here.

Sister M. Frederic, M.D.
Holy Family Hospital, Patna



Sister M. Frederic, M.D. and Sister M. Paul, M.D. check X-rays together at Holy Family Hospital, Patna.

INDIA

The Perils of Sister Pascal

Sister M. Jacinta just stopped by and said that I should tell you of the way to travel lightly here in India. That is an art in itself. I am really a home loving person and do not care to travel. However, once the decision has been made that I cannot put a trip off any longer, I decide to make the best of it and enjoy myself.

In February I went to Patna for Retreat and this is what I carried: six habits and veils plus prayerbooks. As two other Sisters were traveling with me, Sisters Jacinta and Valentina, I had to pack two bedrolls. This consists of blankets, pillows, sheets and thin mattresses. I used my cape shawl as a mattress and wrapped up in the old leopard skin rug that is as warm as toast. Then, of course, there is the ever necessary water flasks and lunch that must be taken.

Still this is going practically empty handed, so there was plenty of room for the books for Kodarma and patients' X-rays for special readings. Since we hate to go any place empty handed, there was also the little token offering of peppers, three dozen big eggs and a pork roast.

There was still room to breathe in the old car that was to take us to the train station, so I decided to take the brooms that Sister Alicia had asked us to buy for the Nursing School at Kurji. What are a few brooms between friends . . . there were only *72* of them! When these were tied to the roof of the car I decided we had better call a halt as the space was really all occupied.

The train was not too crowded and we were able to get two luggage racks to sleep on and one bench. Since I was afraid that someone might take the brooms off by mistake during the night, I slept with my feet propped up on part of them. With my feet in the straw brooms and the leopard skin blanket on top of me I really felt like singing, "Away in a Manger". We had a very uneventful trip, except once when the train slammed on its brakes too hard and half of the brooms fell to the floor. It took me a few minutes to get them back up as I am not as strong as these coolies.

After Retreat was over, it was time to return home . . . so we added 30 pounds of welding rods, 100 pounds of soap chips and 20 dozen lemons to our luggage.

That, my dear Sister, is my secret for traveling light!

Sister M. Pascal
Holy Family Hospital, Mandar

PAKISTAN

Initiation

My first week here in Rawalpindi was a real initiation into missionary life. I arrived in the coldest weather they have had in a number of years. In addition to this, we had rain. It seems that when it rains the electricity has a habit of going off, which it obliged us by doing at 5 a.m.! It was pitch black as I groped my way to chapel where someone was getting out candles. (We make our own candles here—also our charcoal.) We said Prime by candlelight, and just before Mass started, the lights came on again. A few days later the boiler, which supplies the water for our quarters, blew up and no hot water!

Another incident took place in the evening while I was sitting at my desk. I was reading and, when I looked up, things started moving. At first I thought I was dizzy but then I realized it was an earthquake. It gave the building quite a shake and I just sat there for a few minutes to see if it was going to get worse before I ran out! Nothing happened to the hospital but in the villages some of the not-so-sturdy houses collapsed. Thus passed my first week in Pindi.

Urdu classes are coming along fine and I have a burning desire to speak it. I find it so hard to be among the people and not be able to talk to them. My greatest frustration is when I get a Pakistani patient on Private Block who can't speak any English. It's easy enough to give the best nursing care that you know but then how to comfort or reassure an anxious husband or mother! Now I am starting to speak simple sentences and understand a few. I have been learning the script along with the Grammar but right now we're concentrating on speaking. The teacher is very good and, thanks be to God, very patient! One morning, when I was having more trouble than usual in remembering my vocabulary, he said to me in typically polite Pakistani manner—"This 'virtue' seems to be with you very much—this forgetting." I agreed, then we both laughed. I had never heard it expressed so nicely before!

The people themselves are very polite and very simple. Their poverty is such that they don't even have a roof over their heads let alone food in their stomachs. The rich are very rich and the poor are very poor. The children are just beautiful whether in rags or riches. I was amazed to see that eye make-up is used on the babies. It's supposed to prevent eye infection and I've heard it actually does have something in it that works to that effect.

Sister M. Mark
Holy Family Hospital, Rawalpindi

INDIA

Mr. Nehru's Funeral

The death of Prime Minister Nehru was a sudden shock to all of us here. An hour before the funeral cortege was to form, Archbishop Angelo Fernandes asked us to come quickly to the Prime Minister's residence to sing some hymns. This was in response to a request of Mr. Nehru's daughter, Mrs. Indira Ghandi. She asked that certain Christian hymns be sung. During his lifetime Mr. Nehru had expressed a liking for these hymns.

We arrived just in time to join an "Episcopal Choir" made up of Archbishop Joseph Fernandes, Bishop Gomes of Bombay and Monsignor Lobo, with Archbishop Angelo Fernandes directing.

The Archbishop asked us afterwards to sing the Pontifical High Mass the following Sunday as the Cathedral Choir was on vacation. And so we Medical Mission Sisters of Holy Family Hospital, New Delhi, had the privilege of singing the Mass in the cathedral, which was offered for the welfare of the country. A portion of it was broadcasted on the radio.

Sister M. Eileen
Holy Family Hospital, New Delhi

PAKISTAN

A Sight or Site?

The opening of our newly enlarged Out-Patient Department brought with it a new addition to the compound in the form of a "chini badam wallah" — a peanut vendor.

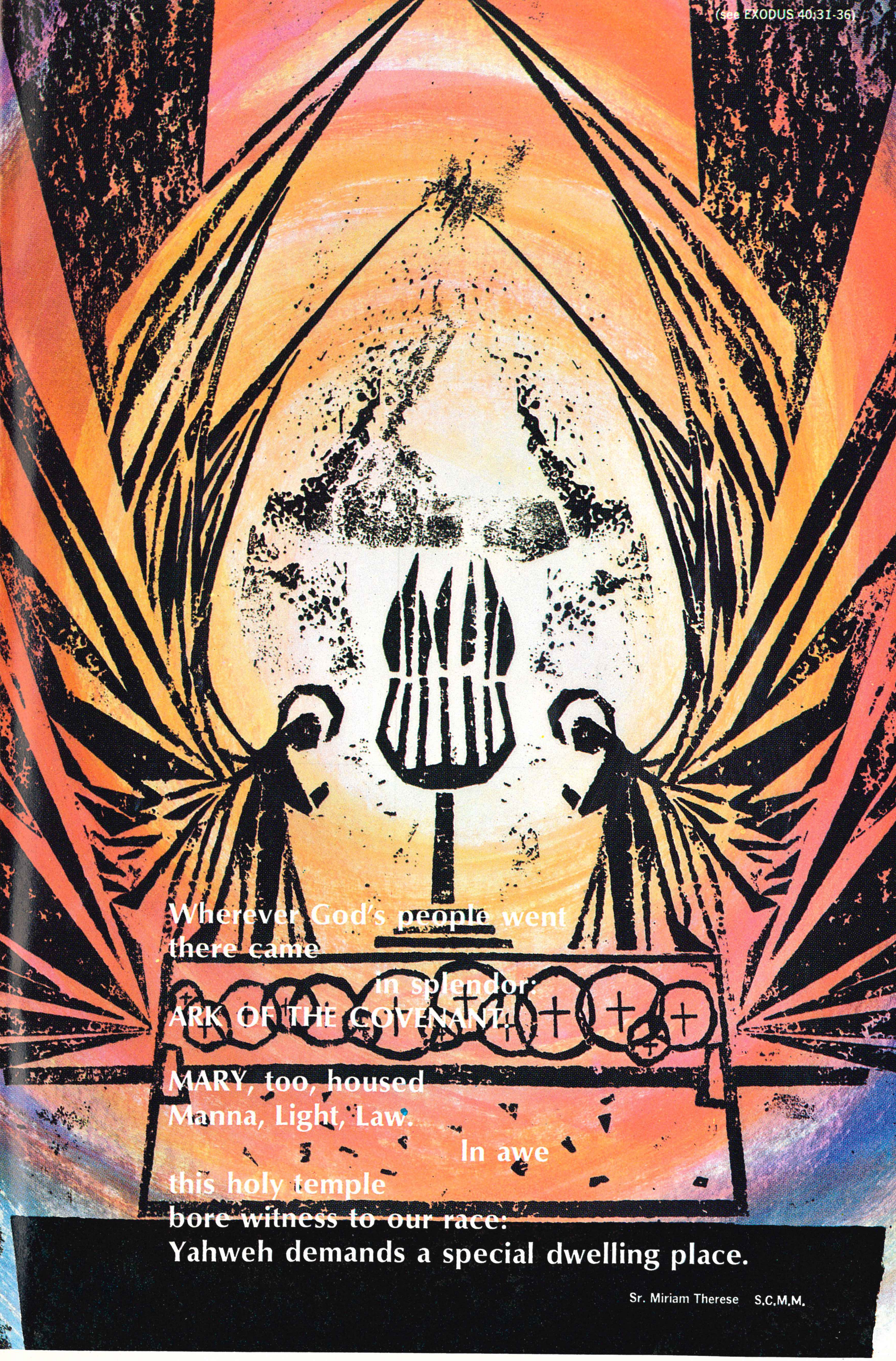
He is a slight man with a very white beard and quick piercing eyes. Every morning he can be seen sitting beneath the lichu tree with his tin full of peanuts. Beside him lies his scale—two little tin plates which dangle by sling from a supporting cross bar. The weights are in the form of various stones — one anna's worth of peanuts is balanced by a very tiny stone, two annas' worth by a little larger stone, etc.

By the middle of the morning there is hardly an inch of floor showing through the peanut shells in the waiting room. However, any suggestion that he move his concession to another site brings forth many reasons for the advantages of the present site as well as a handful of peanuts to the complaintant. Now, every Sister who goes past the lichu tree is immediately offered two peanuts by way of compensation for "mushkil," that is, an inconvenience caused.

During the times that the Out-Patient Department is not open you can hear the little man out on the road or in the surrounding villages chanting his call of "chini badam—chini badam."

Sister M. Terence
Holy Family Hospital, Mymensingh

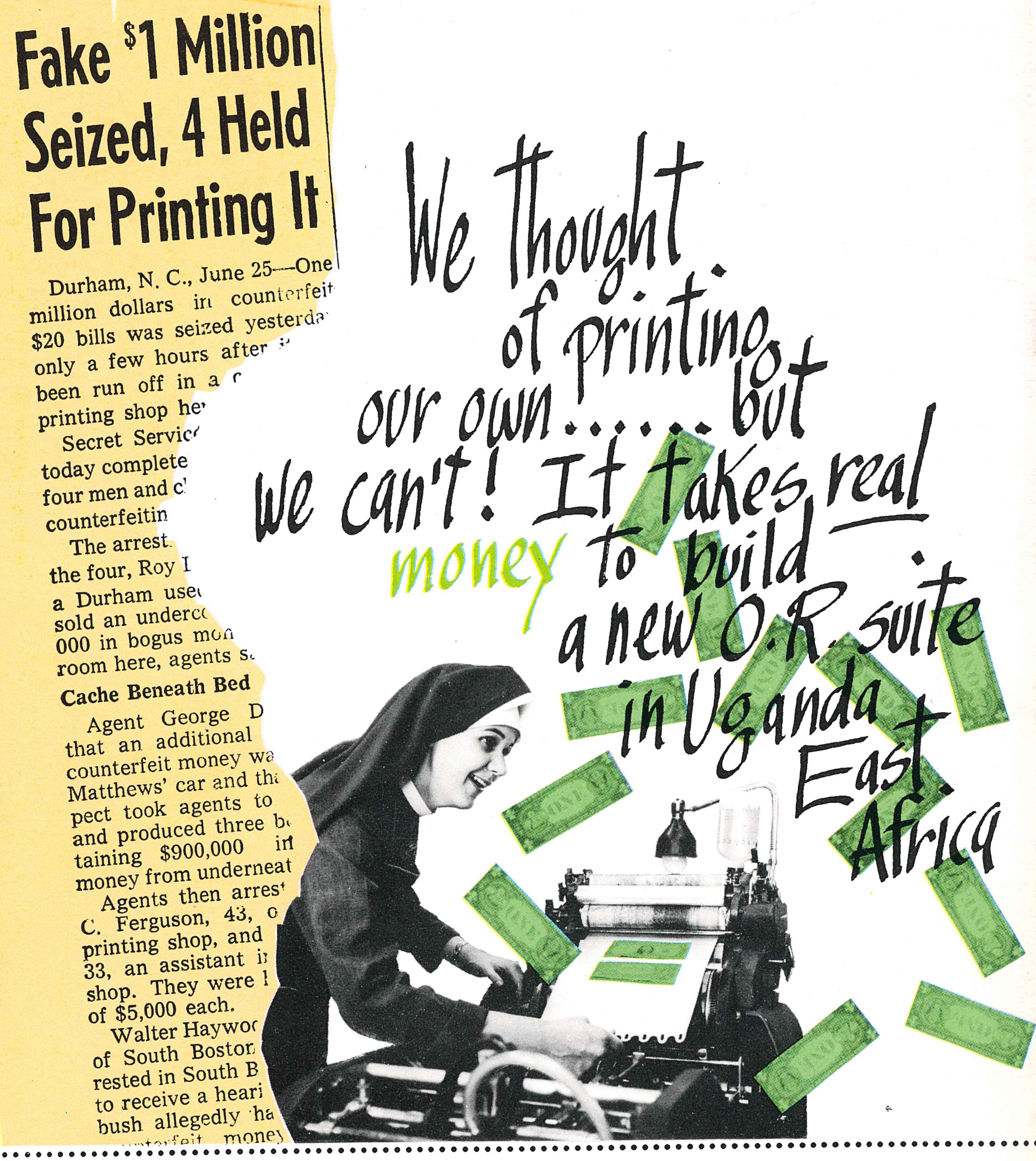
(see EXODUS 40:31-36)



Wherever God's people went
there came
in splendor:
ARK OF THE COVENANT.

MARY, too, housed
Manna, Light, Law.
In awe
this holy temple
bore witness to our race:
Yahweh demands a special dwelling place.

Sr. Miriam Therese S.C.M.M.



Fake $1 Million Seized, 4 Held For Printing It

Durham, N. C., June 25—One
million dollars in counterfeit
$20 bills was seized yesterda
only a few hours after
been run off in a
printing shop he
Secret Servic
today complete
four men and c
counterfeitin
The arrest
the four, Roy I
a Durham use
sold an underc
000 in bogus mon
room here, agents s

Cache Beneath Bed

Agent George D
that an additional
counterfeit money wa
Matthews' car and tha
pect took agents to
and produced three b
taining $900,000 in
money from underneat
Agents then arrest
C. Ferguson, 43, o
printing shop, and
33, an assistant i
shop. They were l
of $5,000 each.
Walter Haywoo
of South Boston
rested in South B
to receive a heari
bush allegedly ha
nterfeit money

We thought of printing our own..... but we can't! It takes real money to build a new O.R. suite in Uganda East Africa

Dear Sisters

Enclosed is some of the real thing to help you build that badly needed O.R. suite in Uganda, East Africa $________

NAME____

STREET______________________________________

CITY____________________ STATE__________________

MEDICAL MISSION SISTERS
Philadelphia 11, Pa.